PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

CLAIMS AS FILED - PART I											
			(Column 1)		(Column 2)		TYPE				ENTITY
TOTAL CLAIMS			<u> </u>	• *			RATE	FEE		RATE	FEE
FOR			.NL	IMBER FILED	NUMBER EXTRA		BASIC FEE		1	BASIC FEE	
TOTAL CHARGEABLE CLAIMS				minus 20:			X\$ 25=		OR	X\$50=	
INDEPENDENT CLAIMS				minus 3:	•		X100=		OR	X200=	
MULTIPLE DEPENDENT CLAIM PRESENT							+180=		OR	+360=	
* If the difference in column 1 is less than zero, enter					r "0" in column 2		TOTAL		OR	TOTAL	:
		CLAIMS	1 .		•			OTHER	THAN		
(Column 1)			,	(Column 2)	(Column 3)		SMALL E	NTITY	OR		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	-20			X\$ 25=		O₽	X\$50=	
	Independent	.3	Minus	-3	=		X100=		OR	X200=	-
	FIRST PRES	SENTATION OF	MULTI	PLE DEPENDEN	T CLAIM		±180=		OR	+360=	
							TOTAL		OR	TOTAL	
ADDIT, FEE											
(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus ·	**	=		′ X\$ 25=		OR	X\$50=	
	Independent	•	Minus	***	=		X100=		OR	X200=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+180=	·	OR	+360=	
TOTAL OR ADDIT. FEE ADDIT. FEE											
(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	to	=	П	X\$ 25=		OR	X\$50=	
	Independent	•	Minus	***	= ·		X100=		OR	X200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+180=		OR	+360=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3 * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
EOB	M DYO 875 787	10/045									